

Incident Report

Print Date/Time: 12/22/2016 11:12

Login ID: ss0139

Lake Stevens Police Department

ORI Number: WA0311900

Incident: 2016-00025205

Incident Date/Time: 12/18/2016 5:22:00 PM

Location: 28TH ST NE / N MACHIAS RD

Yes

No

(425) 954-9399

Venue:

Incident Type:

Collision

OT NE / N MACHIAS RD

 Source:
 911

 Priority:
 3

 Status:
 3

Nature of Call: POSTED TO CITY WEBSITE

Unit/Personnel

Phone Number:

Prior Hazards:

Report Required:

LE Case Number:

Unit Personnel

1931 SS0075-Christensen1951 SS0144-Michael

Person(s)

Role Name Address Phone Race Sex DOB No. 1 Reporting Party HOSKINS, JOSEPH (425) 954-9399 12612 20TH ST NE 2 **Involved Party** LINDSAY, ROBERTA (425) 293-8613 White Female 09/05/1965 ROSE

Lake Stevens WA 982583980

1 Passenger GONZALEZ, MONICA 12612 20TH ST NE (425) 229-7220 Unknown Female 08/15/1987 ANNA

Lake Stevens WA 982587726

Vehicle(s)

RoleTypeYearMakeModelColorLicenseStateInvolved VehiclePassenger Car1991Toyota4RunnerAYG2079WA

Disposition(s)

Disposition Count

R 1

Property

Date Code Type Make Model Description Tag No. Item No.

CAD Narrative

12/18/2016: 17:49:14 SP0413 Narrative: AAA ER FOR VEH

12/18/2016: 17:24:21 SP0166 Narrative: LR/166

12/18/2016: 17:24:19 SP0166 Narrative: RP IS WITH R&R STAR TOWING, UNK IF HE WILL WAIT WITH DRIVER OR IS

CAPABLE OF PULLING THE VEH OUT OF THE DITCH - ALT PHONE 425-422-5835

12/18/2016: 17:23:38 SP0407 Narrative: BCST

12/18/2016: 17:23:20 SP0166 Narrative: NON BLKING

12/18/2016: 17:22:54 SP0166 Narrative: AC NON INJURY, BLK TOYT 4RUNNER IN DITCH

	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT NO. E621640	2 3											
	COLLISION REPORT 1591971 CASE # 2016-00025205												
1 1	STATE ROUTE OTHER OTHER LOCAL AGENCY CODING												
2 1	COUNTY RD PRIVATE WAY HIN A HUN TOTAL # OF OBJECT DOLDHAY DITOU												
.4	M M D D Y Y Y Y TIME (2400) COUNTY# MILES CITY#												
3	DATE OF COLLISION 12 - 18 - 2016 1720 31 N E W OF 0664 0664												
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION V NON-INTERSECTION BLOCK NO.												
la	MILE POST	0 3											
5	DISTANCE OF (REFERENCE OR CROSS STREET) MILES N E 28TH ST NE FEET S W												
	UNIT 01 MOTOR VEHICLE PEDAL- CYCLE DAMAGE THRESHOLD MET YES NO DE 4252938613												
6	LAST NAME LINDSAY FIRST NAME ROBERTA MIDDLE INITIAL R												
	STREET 12612 20TH ST NE												
7	CITY LAKE STEVENS ST WA ZIP 982583980	1 2											
8	CDL RESTRICTIONS ENDORSEMENTS 2												
2	DRIVER'S LINDSRR3520E STATE WA SEX F D.O.B. MMDDYYYY 09 _ 05 _ 1965												
0	ON DUTY STATUS AIRBAG 2 RESTR. 4 EJECT 1 HELMET USE CLASS 1 NATURE OF INJURIES												
2 5	LICENSE PLATE # AYG2079 STATE WA VIN# JT3RN37W5M0009520												
2	TRAILER PLATE # STATE STATE STATE												
4	1991 TOYI THE TRUE TO YES NO VEST NO V	70 TO											
	LIABILITY INSURANCE I. / INSURANCE CO GEICO (262529002	FROM TO											
[j_2	NEFFECT STANDING STANDING CITATION # CHARGE												
H	UNIT 02 MOTOR PEDAL- PEDESTRIAN PROPERTY OWNER DAMAGE THRESHOLD MET PHONE PHONE												
i	LAST NAME FIRST NAME MIDDLE INITIAL												
7	STREET NEW ADDRESS												
В	CITY ST ZIP												
9	CDL RESTRICTIONS ENDORSEMENTS	;											
	DRIVER'S LICENSE # SEX D.O.B. MMDDYYYY												
1	ON DUTY STATUS AIRBAG RESTR. EJECT HELMET USE CLASS NATURE OF INJURIES												
2	LICENSE PLATE # STATE VIN#												
3	TRAILER PLATE # STATE STATE STATE												
4	VEH. YEAR MAKE MODEL STYLE VEHICLE TOWED BY GOVET-VEHICLE YES NO	= ,											
	REGISTERED OWNER INFO. VEHICLE NO. 2 SHADE IN DAMAGED AREA 2 3 4 INSURANCE CO												
	LIABILITY INSURANCE INSURANCE CO NEFFECT 9 TOP 9 TOP 10 BOTTOM 5 STANDING OF THE STANDING OF T												
	STADING												
6	PAGE 01 OF 3												





CORRECTION

CASE #

REPORT NO.

E621640

2016-00025205

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)																		
NAME (LAST, FIRST, MIDDLE INITIAL) GONZALEZ MONICA A																		
ADDRESS & PHONE # 12612 20TH ST NE LAKE STEVENS WA 982587726 4252297220									SEX F	D.O.E MMDDY	B. 08		15]-[1987			
PASSENGER WIT	NESS	JNIT #	1	SEAT POS.	3	AIRBAG	2	RESTR.	4	EJECT	3	HELMET USE		INJURY CLASS 1	ı	NATURE	OF INJU	IRIES
NAME (LAST, FIRST, MIDDLE INIT	ΓIAL)																	
ADDRESS & PHONE #												SEX	D.O.E	3. YYY	_		_	
PASSENGER WIT	NESS	JNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE	OF INJU	IRIES
NAME (LAST, FIRST, MIDDLE INIT	ΓIAL)																	
ADDRESS & PHONE #												SEX	D.O.E MMDDY				7-	
PASSENGER WIT	NESS	JNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE	OF INJU	IRIES
		'			'	1	N/	ARRAT	IVE									
V1 was driving west bound on 28th St Ne. It came to a stop at the intersection of N Machias and 28th St NE. The vehicle then made a right turn northbound.																		
V1 made the right turn too tight and drove onto gravel on the side of the roadway. It then slid off the roadway and came down on its right side in a deep ditch.																		
Vehicle was towed from the scene by AAA.																		
7 01 11 01 0 11 0	20 10 11				<i>C 2, 1</i>													
I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)																		
A. MICHAEL #0144 INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST. DET DATED PLACE SIGNED																		
APPROVED BY								27.11	•		DATE			32:15 AM	,			
BADGE OR ID # 01	144		ORI#	WAO	311900				TIM	ME POLICE D	ISPATO		2 <i>PM</i>			OLICE AR	RIVED	5:29 PM

OF 3

REPORT NO. E621640

CASE#

2016-00025205

DATE AND TIME 0F COLLISION 12/18/16 17:20

